



Adult Program Trip-Read & Go Pittsboro, NC

Wednesday, October 10, 2018

Did you read *Cold Heart* by Karen Pullen? Then you will really enjoy this trip to meet and talk with the author. We will be leaving from Anne Gordon Active Adult Center at Millbrook Exchange Park (1901 Spring Forest Road) at 10:00am.

Join us as we travel to Pittsboro, NC, the county seat of Chatham County, to meet and talk with the author of *Cold Heart*, Karen Pullen. We will have lunch, on your own at S & T's Soda Shoppe. Built in 1916, it was a successful pharmacy & soda shop. They have a varied menu (avg. \$3.50—\$8.99) that includes 32 flavors of ice cream for dessert. Our group will be eating and meeting with the author on the second floor of the restaurant therefore, you will need to be able to walk up a flight of stairs to the room.

Following lunch you will have free time to wander downtown Pittsboro. Visit the unique shops and see the restored Chatham County Courthouse, which on March 25, 2010, caught fire while undergoing renovations. The building suffered severe damage to the clock tower and third floor. On March 26, 2010 the clock tower collapsed onto the main building. It has now been beautifully restored and is open to the public. Be sure not to miss the history museum that is inside. The group will arrive back at the Anne Gordon Center in Raleigh at approximately 3:45pm.

Price:

\$20.00 City of Raleigh Resident

\$35.00 Non-City of Raleigh Resident

Price Includes:

Transportation via departmental bus and author talk. All other activities and lunch are on your own.

Patron Expectations:

This trip has a lite volume of walking expected, including some steps, and uneven paths with loose bricks and gravel. Patrons must be able to walk up a flight of stairs on their own as the restaurant is not handicapped assessable. Patrons must be able to keep to the scheduled timeline of the trip. Please remember there is no one-on-one assistance provided by the escorts.

Cancellation Policy:

Cancellations must be made in writing at least 14 days prior to trip departure date to receive a refund. Full or partial refunds will be made only if a replacement can be found, and are subject to non-refundable expenses incurred by the Department. If the Department cancels a trip, a full refund will be given.



Parks,
Recreation and
Cultural Resources
parks.raleighnc.gov

Five Point Center 919-996-4730

Anne Gordon Center 919-996-4720

Walnut Terrace Center 919-996-6160



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Make checks payable to: City of Raleigh

To Register: Complete the form below and return with full payment to:

Five Points Center for Active Adults

Adult Program

2000 Noble Road Raleigh, NC 27608

Walk-in registrations are taken at any of our Active Adult Centers.

Credit Card payments can be made by phone or by RecLink: #234502

For Additional Information Contact : Adult Program Staff at 919-996-4730 or 919-996-4720

Keep top portion for your records

Cold Heart - Pittsboro, NC Wednesday, October 10, 2018 #234502

All participants must have a current Yearly Trip Registration Form filled out and returned to the Adult Program to be registered for any Adult Program trip. The Yearly Trip Registration Form covers all trip waivers and registration January thru December. Forms can be obtained from any the Adult Trip Brochure, an Active Adult Center or on line at www.parks.raleighnc.gov (keyword search Adult Yearly Trip).

Individuals without a current Yearly Trip Registration Form: A spot on the trip will be held while being placed on the trip waitlist until a current Yearly Trip Registration Form is received. Once the form is received participants on the waitlist will be moved over to the active trip list.

By submitting a registration form and payment it is understood that it is the responsibility of the patron to update any personal information prior to participating in any and all Adult Program trips.

Account Information ☐ Account is Up To Date ☐ Update Account Information ☐ Create a New Account

Name of Participant _____ Name of Participant _____

Only fill out the following information if an account needs to be updated or a new account needs to be created

Address _____ City _____ State _____ Zip Code _____

Telephone _____ Email: _____

Emergency Contact _____ Primary Phone _____ Secondary Phone _____

I want Parks, Recreation and Cultural Resources to know about these medical conditions for this participant: _____

Office use: _____
Staff Initials _____ Date _____